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SERIAL NUMBER 10/633,371	FILING OR 371(c) DATE 08/01/2003 RULE	CLASS 623	GROUP ART UNIT 3733	ATTORNEY DOCKET NO. 5259-14600
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APPLICANTS

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** CONTINUING DATA ******None AR*** FOREIGN APPLICATIONS ******None AR*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 10/30/2003

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		
Verified and Acknowledged <i>Amelia Reina</i>	Examiner's Signature <i>AR</i> Initials		
STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
FL	8	64	9

ADDRESS

35690

TITLE

Spinal implant

FILING FEE RECEIVED 2208	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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